I thought perhaps I should recite a bit of poetry by William Butler Yeats’ called the ‘Second Coming’, commonly known as ‘things fall apart, the centre cannot hold’. The phrase was popularized by Chinua Achebe is his novel “Things Fall Apart” whose title bears the central massage of the work. This poem is a befitting metaphor and an interpretation of what is currently happening in academic, private and public oral health space:

Turning and turning in the widening gyre
The falcon cannot hear the falconer;
Things fall apart; the centre cannot hold;
Mere anarchy is loosed upon the world,
The blood-dimmed tide is loosed, and everywhere
The ceremony of innocence is drowned;
The best lack all conviction, while the worst
Are full of passionate intensity.

Surely some revelation is at hand;
Surely the Second Coming is at hand.

I painfully reminisce about a long an impressive history and reputation that the training of oral health professionals in South Africa and former MEDUNSA, enjoyed. Our graduates were sought after globally and our training the envy of the world. We could vouch without hesitation that we qualified world-class professionals who provided quality oral health service to South Africa. The current state of oral health in the country and SMU is lamentable. I ask myself, how, when, why and where did it all go so wrong? Has management failed to provide leadership and oversight of the academic processes? Is our current crop of academics not equal to the task to deliver on a complex dental curriculum? Are our students university ready? Has our basic education dismally failed to prepare these cohorts for higher education? Are our students teachable or recalcitrant pseudo-militants? Has academia become a fiercely contested space characterised by incursion of politics and erosion of academic autonomy? However, one looks at the present state of dentistry in general, and academic dentistry in particular, we are in dire straits. The centre is not holding, and things are falling apart as the ‘widening’ gyre, got further and further away from its centre. The falcon has separated from the falconer, without reason, without rule, without larger cause, it is lost. Yates metaphor of ‘loss’ and ‘falcon’ symbolizes the chaos and tragedy that has befalled oral health fraternity; with the individual and collective wandering about and trying to find meaning.

We can all ponder and disagree about how, why, and when did we get to this point. It would be futile to dispute is that over time ‘anarchy’, and ‘bloody’ demise was ‘loosened’ on our beloved profession, taking away what was innocent and pure. Regrettably, the brave watched timidly as the emboldened anarchists ravaged and destroyed without cause, the essence of our profession.

The second stanza of the poem, prophesies about the dawning of the new era and the blowing winds of change. This suggests that something altogether different from the current is about to happen. I ask, what kind of second coming should we envisage? What new order should we look forward to? Will this new era be thrust upon us? Then again should we re-imagine, determine and create this new era?

The past 15 years or so indicates the most difficult period for National Oral Health service. The office of the National Health Directorate was hollowed out, repurposed and rendered dysfunctional. Consequently, the capacity and stature of this office to guide oral health in the country was systematically destroyed. Similarly, the importance and influence of the provincial oral health offices have been severely limited. The heads of oral health act as figureheads, de facto provide little or no strategic and governance function for the oral health in the provinces. The combined failure of these structures has collapsed public oral health, if we ever had one. The services provided to our people are mostly dental extractions and nothing else. This is a travesty and disservice to our people, and more should be done.

Training institutions should serve as strategic resource for the country, offering training of the critical human resource of oral health. These centers of excellence must innovate and develop solutions to the country’s oral health challenges. The achievement of these institutions in bringing about meaningful changes in oral health have at best been modest. We are yet to conduct a representative national oral health surveys to quantify the oral health burden in the country. This crucial undertaking has been delayed, deferred and postponed due to unnecessary politicizing, to the detriment of South Africa. Similarly, a comprehensive, well-consulted national oral health policy remains elusive. Is this monumental failure of dental schools, due to lack of capacity or because the ‘centre cannot hold’? Frankly, this points to serious leadership challenges facing dental schools in South Africa.

In the past 6 years, all dental schools in the country were led by acting Deans, as we eagerly awaited the appointment of substantive leaders in these institutions.
This is attributable in part poor succession planning and development of the next generation of academic leaders for oral health. The same, challenges are evident in the various specialist disciplines as most schools lack the critical experience and talent to populate departments. Recruitment and retention of suitable staff is often an afterthought and not embedded best practice and culture. We ‘fail to ‘grow our own timber’. One wonders if this state of affairs could explain why none of the dental schools attained full postgraduate accreditation in the past review cycle. Leadership matters.

The Covid-19 pandemic has negatively affected the training of dental students in the past 600 days. Consequently, the prescribed clinical requirements and requisite competency levels could not be achieved due to condensed academic calendar and limited clinical exposure. Thus far, no formal report detailing the impact and implications of the pandemic on oral health training has been produced by the HPCSA. The regulator has no concrete evidence whether the graduates they register to practice meet the gazetted clinical competencies. The HPCSA has not pronounced on the specific clinical, cognitive and affective competencies necessary for registration in this time of Covid-19. In keeping with the mandate “to protect the public and regulate the profession”, the gyre of the regulator has widened, turning further and further away from the centre. The oversight role of the HPCSA is not discretionary, yet is has been left to the pleasure of the training institutions. Clearly, governance and oversight is deficient, the best lack conviction, the centre is not holding and things fall apart.

There are ample examples of unfortunate mishaps in dentistry that brought us to this point. Urgent and decisive intervention is necessary to usher the Second Coming. We dare “go gentle in to that good night” We ought to “rage, rage against the dying of the light” – Dylan Thomas. Full of conviction and passionate intensity ought to choose “not carry thyself down to die”, for “when I go to my grave my head will be high “–Bob Dylan.

This piece is meant to raise critical and necessary questions to implore all of us in the Oral Health space to reflect and truly partake in the development of the kind of oral health our country deserves. We cannot sit back and continue to let those that are at the helm of leading the profession fail both the profession and the nation! It certainly behoves all of us to buckle up and get down and dirty to right the wrongs of near past and reshape the profession we want for future generations.

I Write What I Like ~ Steve Bantu Biko

Do the CPD questionnaire on page 649

The Continuous Professional Development (CPD) section provides for twenty general questions and five ethics questions. The section provides members with a valuable source of CPD points whilst also achieving the objective of CPD, to assure continuing education. The importance of continuing professional development should not be underestimated, it is a career-long obligation for practicing professionals.

Online CPD in 6 Easy Steps

1. Go to the SADA website www.sada.co.za.
2. Log into the ‘member only’ section with your unique SADA username and password.
3. Select the CPD navigation tab.
4. Select the questionnaire that you wish to complete.
5. Enter your multiple choice answers. Please note that you have two attempts to obtain at least 70%.
6. View and print your CPD certificate.